

SHF-9
P.T.2

IN CONFIDENCE

Workload					Address
P.S.U.	<input type="checkbox"/>			
Block	<input type="checkbox"/>			
Dwelling	<input type="checkbox"/>				Further Identification
Household	<input type="checkbox"/>			



AUSTRALIAN BUREAU OF STATISTICS

SPECIAL
SUPPLEMENTARY
SURVEY
9

DETAILS OF CALLS							
	1st CALL	2nd CALL	3rd CALL	4th CALL	5th CALL	6th CALL	7th CALL
DAY & DATE							
TIME IN							
TIME OUT							
APPOINTMENTS ETC:						

USUAL RESIDENTS

- WHAT ARE THE NAMES OF ALL THE PEOPLE WHO USUALLY LIVE HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD?
- Complete Cols A to F.
- Ask coverage for usual residents. Record coverage in Col H.

VISITORS

- WILL ANY ONE ELSE BE STAYING HERE TONIGHT?
- Complete Cols A and B.
- Ask coverage for visitors and record in Col H.
- Complete Cols C to F for visitors in on coverage.

COVERAGE FOR USUAL RESIDENTS

1. WILL ANY OF THESE PEOPLE BE STAYING AWAY TONIGHT?
Yes - Ask Q2 for each such person AND INCLUDE all other usual residents.
No - INCLUDE all usual residents.
2. HAS . . . BEEN AWAY FOR ALL OF THE TIME FROM SUNDAY THE 23RD OF FEBRUARY UNTIL NOW?
Yes - → Q3
No - Include
3. WILL . . . BE AWAY FOR ALL OF THE TIME FROM NOW UNTIL MONDAY THE 10TH OF MARCH?
Yes or Don't Know - Exclude
No - Include

COVERAGE FOR VISITORS

4. DOES . . . USUALLY LIVE IN A PRIVATE DWELLING?
Yes - → Q5
No - Include
5. HAS . . . BEEN AWAY FROM . . . USUAL RESIDENCE FOR ALL OF THE TIME FROM SUNDAY THE 23RD OF FEBRUARY UNTIL NOW?
Yes - → Q6
No - Exclude
6. WILL . . . BE AWAY FROM . . . USUAL RESIDENCE FOR ALL OF THE TIME FROM NOW UNTIL MONDAY THE 10TH OF MARCH?
Yes - Include
No - Exclude

Person No.	A NAME	B TYPE	C RELATIONSHIP	D SEX	E AGE
		UR = 1 VIS = 2	To Head Within Household	M = 1 F = 2	WHAT WAS . . .'S AGE LAST BIRTHDAY? Age
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					

COL G - CHANGE OF MARITAL STATUS

Interviewer: Follow Q7 → Q13 until instruction is reached for completion of Col G.

7. Sequence Guide

- Respondent is 'never married' (6 in Col F)
→ leave Col G blank
- Married or Defacto
 - Male whose partner is on SHF
→ leave Col G blank
 - Female whose partner is on SHF
→ Q10A
- Married or Defacto UR whose partner is not on SHF → Q8
- Otherwise → Q10B

8. DID ... LIVE WITH ... PARTNER AT ANY TIME BETWEEN JULY 1984 AND JUNE 1985?

Yes → Q9

No → leave Col G blank

9. FOR HOW MANY MONTHS DURING THIS PERIOD DID ... LIVE WITH ... PARTNER?

Enter number of months in Col G.

10A. (WAS/WERE) ... AND ... (specify response from Col F) BEFORE THE 1ST OF JULY 1984?

10B. (WAS/WERE) ... (specify response from Col F) BEFORE THE 1ST OF JULY 1984?

Yes → Leave Col G blank

No → Q11

11. Sequence Guide

- Defacto
(Code 2 in Col F) → Q13
- Otherwise → Q12

12. FOR HOW MANY MONTHS (HAS/HAVE) ... BEEN (specify response from Col F)?

Enter number of months in Col G.

13. FOR HOW MANY MONTHS (HAS/HAVE) ... BEEN LIVING WITH ... ?

Enter number of months in Col G.

14. Interviewer: Complete a questionnaire for all persons who are in on scope and coverage.

Person No.	F	G	H	I	J
	MARTIAL STATUS	CHANGE OF STATUS	SCOPE AND COVERAGE	Q'AIRE'S	HOUSEHOLD TYPE CODE
	WHAT IS ... PRESENT MARTIAL STATUS OR LIVING ARRANGEMENT? Married=1 Divorced=4 Defacto=2 Widowed=5 Separated=3 Never Married=6	Q7 - Q13	In = 1 Out on Scope = 2 Out on Cover. = 3	Comp. = 1 Imcomp. = 2	<u>Interviewer:</u> • When editing, tick Household Type Code. • Code Household Type on the basis of UR persons only, ignore visitors.
01					1 <input type="checkbox"/>
02					2 <input type="checkbox"/>
03					3 <input type="checkbox"/>
04					4 <input type="checkbox"/>
05					5 <input type="checkbox"/>
06					6 <input type="checkbox"/>
07					7 <input type="checkbox"/>
08					8 <input type="checkbox"/>
09					9 <input type="checkbox"/>
10					

RESPONSE REPORT

INITIAL STATUS		INTERVIEWER TO COMPLETE
01 FULLY RESPONDING — ALL SCHEDULES FULLY COMPLETE for all persons in on scope and coverage for whom schedules are required		<input type="checkbox"/> 01
OTHER — <ul style="list-style-type: none"> 02 Full refusal } <i>Complete a Refusal Report (Form R)</i> 03 Part refusal 04 Full non-contact 05 Part non-contact 06 Language problems 07 Death/Illness 		<input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10
SAMPLE LOSS — <ul style="list-style-type: none"> 08 All persons out on scope coverage 09 Vacant dwelling 10 Dwelling under construction, convert to non-dwelling derelict, demolished or listed in error 		<i>Record full details below</i>
OFFICE USE ONLY — Final Status (enter code)		<input type="checkbox"/> <input type="checkbox"/>

DETAILS: CODES 04-10